## City of Lakesite, TN 9201 Rocky Point Rd

Lakesite, TN 37379

Phone: (423) 842-2533 Fax: (423) 842-8110

Hours: Mon-Thurs 9:00 a.m. – 2:00 p.m. Fri 9:00 a.m. - Noon

## **DEMOLITION PERMIT APPLICATION**

**Owner or Agent Signature** 

Permit No. D-	-
Plan Review Fee (if applicable) \$  Site Assessment Fee (if applicable) \$	_
Permit Fee \$	_
Double Fee (if applicable) \$  Certificate of Occupancy Fee \$	<del>-</del>
TOTAL FEE \$	

Building Official

Non Refun	dable							
Please Print	Contract Value Of Work: \$			Fee Adjustment: \$ Approved by				
Clearly or	Number and Street Name			Suite / Unit Number			Zip Code	
Туре	State Tax Map Number			Lot Number	Sub	division Name		
	Ownership is: Private Public (Government)							
Property	First Last		Mailing Address:		Phone:	Phone:		
Owner	Company							
Contractor	First	Last	Mailing Address:			Phone:		
		Last					Filolic.	
	Company		TN State Lic. # (copy required)					
	First	Last	Mailing Address:			Phone:	Phone:	
Agent	Company or Pal	ationship to Appl.						
	Company of Ker	attonship to Appi.						
Masonry								
-			call (423) 643-5970					
	•	-	ne property line and	•	• •			
(initials of	applicant)							
The undersigned does hereby declare that the statements contained in this document, those submitted with this document, and on the reverse side hereof, are true and correct to the best of his or her knowledge, information and belief.				App	roved byPlans R	Review	Date	
Printed Name								